


## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

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<b>Title of Invention</b>	Candlewick-Fixing Device for Burning Candlewicks				
First Named Applicant :	Carol Pierce				
Attorney Docket Number :	04-0043				
<p>I hereby appoint the registered practitioner(s) at Customer Number:</p> <p>30550</p>  <p>as attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.</p> <p>I am the Applicant/Inventor.</p> <p>Full Name of Applicant of Record:</p> <table border="1"><tr><td colspan="2">Carol Pierce</td></tr><tr><td>Signature: Carol Pierce</td><td>Date: 2004-06-10</td></tr></table>		Carol Pierce		Signature: Carol Pierce	Date: 2004-06-10
Carol Pierce					
Signature: Carol Pierce	Date: 2004-06-10				

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Application Number	
Filing Date	
First Named Inventor	Carol Pierce
Title	Candlewick-Fixing Device for Burning
Art Unit	
Examiner Name	
Attorney Docket Number	04-0043

I hereby appoint:

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30550

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<input type="checkbox"/> Firm or Individual Name	Bill & Mary Lou Inc.				
Address	101 Lombard Street #510W				
Address					
City	San Francisco	State	CA	Zip	94111
Country					
Telephone	415-397-8056	Fax	415-397-6056		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name	Carol Pierce		
Signature	<i>Carol Pierce</i>		
Date	6-10-2004	Telephone	805-544-3600

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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